IOWA ATHLETIC COMMISSION: Official Weigh-In Form 100-0000 (03/14)

Weigh-In Date:		Event Date:		Event T	Box		MM	IA		Pro Boxing		Pro Kickboxii	ng	
Event Name:				Promot Name:	ter									
Weigh-In				1 (dilic)		1								
Location:				City:					State:	IOW	/A	Zip Code:		
	1.4.01	<u> </u>				D1 11/		<u> </u>		1 ,	D 10			N T .
Wei	ght Class:		Blue Corner F	<u>ighter:</u>		Blue Wei	ight:	Re	d Weight:	<u>.</u>	Red C	orner Fighter	_	Notes
_	Bout:1 lbs	_			-									3x
-	Bout:2 lbs	_			-									3x
: -	Bout:3 lbs	_			-									3x
-	Bout:4 lbs	_			-									3x
-	Bout:5 lbs	_			-									3x
_	Bout:6 lbs	_			-									3x
:	Bout:7 lbs	_			-									3x

Weight Class:	Blue Corner Fighter	Blue Weight:	Red Weight:	Red Corner Fighter:	Notes							
Bout:8 lbs					3x_							
					_ • -							
Bout:9					3x_							
lbs					_ 34							
Bout:10					3x_							
lbs					_ Jx							
Bout:11					3x_							
lbs												
Bout:12					3x							
lbs					_							
Bout:13					3x							
lbs	-				- -							
Bout:14					3x_							
lbs					_							
			•									
Attending Weigh In Official(s) and/or Deputy Commissioner(s)												
1.		2.										
3.		4.	4.									
PLEASE READ COMPLETELY												
I certify that the fighters on the attached form were weighed in by me with an accurate scale on the date listed above. The weight listed in the "weight" column on the attached page is a												
true and accurate reflection of the exact weights of all fighters on the date listed. All fighters had an opportunity to observe their opponent weigh-in and all fighters were weighed in on the same date. Any exceptions to this procedure are explained above or on an attached page. Furthermore, a summary of any disputes which arose at the weigh-in, including the resolution or												
ruling by the Weigh-In Official is attached. Furthermore, all fighters were offered a copy of the Iowa MMA Rules at the time of the weigh-in.												
Official in	<u> </u>											
Charge of												
Weigh-In												